STATE OF NEW HAMPSHIRE

2019 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECTIVED

PLEASE PRINT

APR 1 8 2019

.l. Name of Lobbyist(s)	LARS	KRIST	TANSEN	NEW DEPART	HAMPSHIRE MENT OF STATE
П. Name of lobbyist's part	mership, firm or co	rporation, if any	•		ACITI OF OTATE
	•	•	- Tres. Co		INNE SAXO
Business Address: (Street)	UDE PLAZE	(Vown/City)	abus OH	1 2/2	āl S
(6/4-249-) (Telephone)	3572 (-)	(Fax)	e-mail SA	XONA ENA	. I Shown
III. This statement covers: reportable expense transactions	(Choose one – file : ctions which are no	separate reports t attributable to s	for each client, OR you any one client).	may file a separate r	eport for
All reportable transaction			· ·	o the following client:	
<u> ΜΑτιο να</u> (Full	Name of Client as it a	ppears on the Lobby	rist Registration Form)		
All reportable transaction unrelated to any particular cl	s by the lobbyist (in ient.	cluding the lobbyi	st's family), or the lobby	ving firm listed below	which are
	il 24, 2019 🖺 n date of registration i	10 3/3 1/19	July 31, 2019 🗍	0/19	
	ober 30, 2019 🗍 • from 7/1/19 to 9/30/1	9	January 29, 2020 [activity from 10/1/19 to 12		
V. There have been no fe If this box is checked, comple Concord, NH 03301.	ees received and n	o reportable tra I suhmit it to the S	ansactions made sinc ecretary of State's Office	e the last report. e, State House, Room 2	204,
VI. Check if additional rep	orts are attached:				
☐ If you have received fee:					
 If you have paid an hone Expense Reimbursement 	rarium or reimburse	d expenses, you n	nust file Addendum B-	Report of Honorarium	S OF
If you, your firm, or you	r family has made po	olitical contributio	ns, you must file Adden	dum C- Political Con	tributions
Sworn Statement/Affirmati I have read RSA 15, RSA 15 and complete to the best of n	B, RSA 14-C and R	SA 664 and hereb	y swear or affirm that th	ne foregoing information	on is true
(Signature of lobbyist)	av	<u>-</u>	12 apr	7 (19 Date)	
LARS KRIS (Print Name of lobbyist)	STIANS	EN			